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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.		
<div>1. Name of conveying party(ies): Mark James Yunker Dale Swatek</div> <div>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div>3. Nature of conveyance: <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Assignment</div><div><input type="checkbox"/> Merger</div></div><div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Security Agreement</div><div><input type="checkbox"/> Change of Name</div></div><div><input type="checkbox"/> Other _____</div></div> <div>Execution Date: December 12, 2002</div>	<div>2. Name and address of receiving party(ies) Name: Satake USA, Inc. Internal Address: Calvin Gray Street Address: 9800 Town Park City: Houston State: Texas Zip: 77036 Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	
<div>4. Application number(s) or patent number(s): 09/904,387</div> <div style="display: flex; justify-content: space-between;"><div>If this document is being filed together with a new application, the execution date of the application is: _____</div></div> <div style="display: flex; justify-content: space-between;"><div>A. Patent Application No.(s)</div><div>B. Patent No.(s)</div></div> <div style="text-align: center;">Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>		
<div>5. Name and address of party to whom correspondence concerning document should be mailed: Name: Keeling Hudson L.L.C. Internal Address: Kenneth A. Keeling Street Address: 981 North Post Oak Road City: Houston State: Texas Zip: 77024</div>	<div>6. Total number of applications and patents involved: <input type="text" value="1"/></div> <div>7. Total fee (37 CFR 3.41).....\$ 40.00 <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Enclosed</div><div><input checked="" type="checkbox"/> Authorized to be charged to deposit account</div></div></div> <div>8. Deposit account number: 11-0307 (Attach duplicate copy of this page if paying by deposit account)</div>	
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<div>9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Kenneth A. Keeling Name of Person Signing</div> <div style="text-align: center;"> Signature</div> <div style="text-align: right;"><div>Dec 13, 2002 Date</div><div>Total number of pages including cover sheet, attachments, and documents: <input type="text" value="1"/></div></div>		